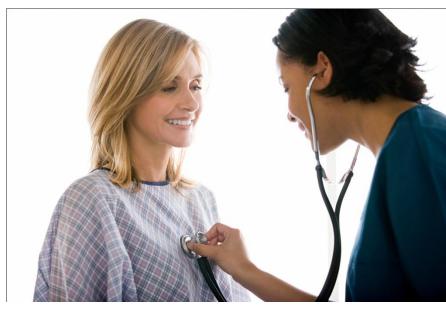


Why focus on primary care?

- Projected PCP shortage
 - 65,960 or 20 percent by 2020¹
- Little improved outcomes
 - U.S. ranked 19th in 2002 and 2003²
 - U.S. ranked 15th in 1997 and 1998²



¹U.S Governmental Accounting Office, "Primary Care Professionals: Recent Supply Trends, Projections, and Valuation Services," Testimony before the Committee on Health, Education, Labor, and Pensions, U.S. Senate, Bruce Steinwald, Director of Healthcare, February 12, 2008.

²Ellen Nolte, Ph.D., and C. Martin McKee, M.D., D.Sc., "Measuring the Health of Nations: Updating an Earlier Analysis," as reported in the Commonwealth Fund summary article, January 2008, volume 2008.



Expected benefits to health care consumers

- Reduced hospitalizations and ambulatory care
 - Includes primary and readmissions
 - Includes sensitive specialty/facility and other costs
- Improved transition of care
- Shared decision making and behavioral engagement
- Increased patient engagement in preventive health and wellness
- Updated clinical decision-support tools to improve care management, tracking and adherence to evidence-based guidelines



Aetna's current **PCMH** model

- Involves the sharing of clinical information
- Enhances our ability to optimize the Care Considerations generated through our CareEngine®
- Financially rewards the group for demonstrating superior outcomes resulting from improved care processes
- Aetna's current PCMH model focuses on all members regardless of their condition and includes all funding types



Aetna participates in multi-payer **PCMH** collaborative pilots

State	Pilot
Colorado	The Colorado Multi-Payer, Multi-State Patient-Centered Medical Home Pilot
Maine	The Maine Patient-Centered Medical Home Pilot
New York	The Hudson Valley Medical Home Project
Pennsylvania	The Pennsylvania Chronic Care Initiative
Maryland	Maryland's Patient-Centered Medical Home Program
Washington State	The Medical Homes Multi-Payer Reimbursement Model



Aetna's current **PCMH** model

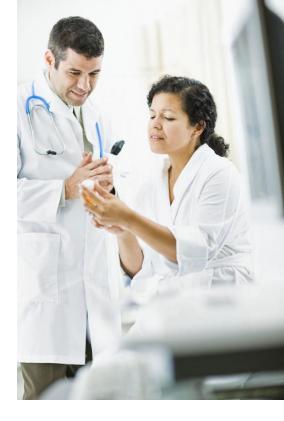
Promising first-year results:

Service or Measure	Result
ER visits	Reduced 8%
IP days	Reduced 25%
Hospital admissions	Reduced 16%
HbA1c score	<7.0, percentage of diabetic members went from 36% to 58% in a year's time
LDL score	<100, percentage of diabetic members went from 38% to 68% in a year's time
Blood pressure score	130/80, percentage of diabetic members went from 22% to 48% in a year's time



Conclusion

- Aetna was an early supporter of PCMH.
- Aetna continues to refine and expand PCMH models nationally.
- Aetna remains committed to this model as a way of improving the quality of care delivered to our members while reducing medical costs.





Patient-Centered Medical Home

•Questions?

